

## Application Data Sheet

### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD Disks::  
Number of Copies of CDs::  
Sequence Submission?::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: VACCINE AND METHOD FOR  
TREATMENT OF  
NEURODEGENERATIVE DISEASES  
Attorney Docket Number:: EIS-SCHWARTZ32A  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 14  
Small Entity?:: No  
Latin Name::  
Variety Denomination Name::  
Petition Included:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israeli  
Status:: Full Capacity

Given Name:: Michal  
Middle Name::  
Family Name:: EISEN BACH-SCHWARTZ  
Name Suffix::  
City of Residence:: Rehovot  
State or Province of Residence::  
Country of Residence:: Israel  
Street of Mailing Address:: 5 Rupin Street  
City of Mailing Address:: Rehovot  
State or Province of Mailing Address::  
Country of Mailing Address:: Israel  
Postal or Zip Code of Mailing Address:: 76353  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israeli  
Status:: Full Capacity  
Given Name:: Ester  
Middle Name::  
Family Name:: YOLES  
Name Suffix::  
City of Residence:: Moshav Beit Gamliel  
State or Province of Residence::  
Country of Residence:: Israel  
Street of Mailing Address:: 94 D.N. Nahal Soreq  
City of Mailing Address:: Moshav Beit Gamliel  
State or Province of Mailing Address::  
Country of Mailing Address:: Israel  
Postal or Zip Code of Mailing Address:: 76880  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israeli  
Status:: Full Capacity  
Given Name:: Oleg  
Middle Name::  
Family Name:: BUTOVSKY

Name Suffix::			
City of Residence::	Beer Sheva		
State or Province of Residence::			
Country of Residence::	Israel		
Street of Mailing Address::	28/25 Mivtza Asfa Street		
City of Mailing Address::	Beer Sheva		
State or Province of Mailing Address::			
Country of Mailing Address::	Israel		
Postal or Zip Code of Mailing Address::	84496		
Applicant Authority Type::	Inventor		
Primary Citizenship Country::	Israeli		
Status::	Full Capacity		
Given Name::	Jonathan		
Middle Name::			
Family Name::	KIPNIS		
Name Suffix::			
City of Residence::	Modiin		
State or Province of Residence::			
Country of Residence::	Israel		
Street of Mailing Address::	3/1 Nahar Hayarden Street		
City of Mailing Address::	Modiin		
State or Province of Mailing Address::			
Country of Mailing Address::	Israel		
Postal or Zip Code of Mailing Address::	71700		
<b>Correspondence Information</b>			
Correspondence Customer Number::	001444		
<b>Representative Information</b>			
Representative Customer Number::	001444		
<b>Domestic Priority Information</b>			
Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This Application	National Stage of	PCT/IL04/001037	11-11-04
PCT/IL04/001037	Appln claiming benefit of 35 USC 119(e)	60/518,627	11-12-03

PCT/IL04/001037 Appln claiming benefit of 35 USC 119(e) 60/610,966 09-20-04  
**Foreign Priority Information**  
Country:: Application Number:: Filing Date:: Priority Claimed::

**Assignment Information**

Assignee Name:: Yeda Research and Development Co. Ltd.  
Street of Mailing Address:: at the Weizmann Institute of Science, P.O.  
Box 95  
City of Mailing Address::  
State or Province of Mailing Address:: Rehovot  
Country of Mailing Address:: Israel  
Postal or Zip Code of Mailing Address:: 76100